	PATENT APPLICATION SEE DETERMINATION DES								Application or Docket Number						
	PATENT APPLICATION FEE DETERMINATION REC								DRD ///OFING						
													10/		
-	CLAIMS AS FILED - PART I (Column 1) (Column 2) TOTAL CLAIMS							SMALL ENTITY TYPE			OR		R THAN LENTITY		
Ľ	OTAL CLAIM	IS		10				RATE	T	FEE	7	RATE	FEE		
F	OR		NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC F	EE :	385.00	OR				
Ţ	OTAL CHARG	10 1	(0 minus 20=		. 0		X\$ 9:		0	OR	1494	1			
L	DEPENDENT		(minus 3 =		<i>'</i>		X43=		0		X86=	-			
М	ULTIPLE DEPI	ENDENT CLAIM	PRESENT					+145=			OR				
•1	if the difference		TOTAL 386		0	OR	+290=								
CHAIMS AS AMENDED - PART II OTHER										THAN					
	Vy01	(Column 1)		(Colum				SMAL	LEN	TITY (OR	SMALL			
AMENDMENT A	/	REMAINING AFTER AMENDMENT		HIGHES NUMBER PREVIOUS PAID FO	ER JSLY	PRESENT EXTRA		RATE	TI	DDI- DNAL	RATE	ADDI- TIONAL EEE			
	Total	10	Minus	-2	0	.0		%\$ 9=	V		OR	X\$18=			
¥	Independent	· /	Minus		3	· 0		X45=	+			X86=			
	FIRST PRES	 		╁	—-[991	7000								
A/0 / 60 = 1 /- (+145= OR										+290=					
(Column 2) (Column 3)											·				
AMENDMENT B	/	CLAIMS REMAINING AFTER AMENDMENT		MIGHE: NUMBE PREVIOU PAID FO	ST FR ISLY	PRESENT EXTRA		RATE	TIC	DDI- NAL EE	-	RATE	ADDI- TIONAL PEE		
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	/ / / / /	(Column 1)		(Column		(Column 3)									
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	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							(43=	/	0	RL	X88=			
н	the costny in service	on 1 in less than the					1+	145=		ÓI	R.	+290=			
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR TOTAL ADDIT. FEE															
	nus undustrial Mili	nder Previously Paid ber Previously Paid	M For IN THE		eedl or	2 00000 93 9			ropriz		ΑU	DIT. FEE L In 1.			

Patient and Tradematik Office, U.S. DEPARTMENT OF COMMERCE

FORM PTO-875 (Rev. 10/03)